

NORTH CAROLINA STATE BOARD OF ELECTIONS AND ETHICS ENFORCEMENT

2018 STATEMENT OF ECONOMIC INTEREST CANDIDATE

919-814-3600 www.ncsbe.gov/Ethics/SEI

Prefix	First Name Middle Na		Last Name	Suffix		
Mr.	Brandon	Marcus	Lofton			
CURRENT EMPLOYER			OB TITLE			
Robinson Brads	shaw & Hinson P.A.	A	ttorney/Shareholder			
NATURE OR T	TYPE OF BUSINESS					
Law Firm						
REASON FOR	FILING (SELECT ALL THA	T APPLY)				
☑ CANDIDAT	E For (Specify the office for	which you are running				
House of Repre	sentatives					
STATE GOVE	ERNMENT JOB (Specify Ager	-	BOARD/COMMISSION (List complete name of all State boards on which you are serving or are being considered)			
JUDICIAL OF	FICER (Specify Office)	1	EGISLATOR (Specify House	or Senate)		

A. Do other immediate far	nily m	embers reside in you	r household?					
☑ Yes ☐ No								
When used throughout this	s form,	the term Immediate	e family inclu	ides your spo	use (unless legally se	eparate	d). It also includes	
members of your extended	l famil	y (your and your spo	use's children	n, grandchildr	en, parents, grandpa	rents, a	nd siblings, and the	
spouses of each of those p	ersons)	who reside in your	household.					
List the full name of all a	dults a	nd emancipated mi	nors in your	household. A	minor is a child und	ler 18 y	years old. Minors are	
emancipated by marriage,					cipation.			
FULL NAME OF ADULTS & EMANCIPATED MINORS	RI	RELATIONSHIP		OYER	JOB TITLE		NATURE OF BUSINESS	
Kellie Lofton	Spous	e	Wells Fargo		Audit Manager		Banking	
B. List ONLY the initial Note: You must list the f		_	· ·				· ·	
INITIALS FOR		ne of each minor ch ELATIONSHIP		OYER			NATURE OF	
UNEMANCIPATED CHILDREN	KI	ELATIONSHIP	ENIFL	OIEK	JOB TITLE		BUSINESS	
BL	son		n/a		n/a		n/a	
CL	son		n/a		n/a		n/a	
PROPERTY INTEREST	rs							
1. As of December 31, 202	17, did	you, your spouse, or	members of	your immedia	ate family:			
A. Have an ownership	— interes	t in North Carolina r	eal estate (inc	cluding your r	esidence) with a man	ket val	ue of \$10,000 or more?	
Yes □ No								
Owner of Real Estat	te	% Ownership	Interest	Loca	tion by City]	Location by County	
D 1 117 111 1 C		100		CI 1				
Brandon and Kellie Lofton	Brandon and Kellie Lofton 100		Charlotte			Mecklenburg		
Brandon and Kellie Lofton 100		Charlotte		Mecklenburg				
B. Lease or rent real es	tate or	personal property to	or from the S	State of North	Carolina with a mar	ket val	ue of \$10,000 or more?	
☐ Yes ☑ No		· · · · · —						
Name of Lessor		Name of Lessee	(Renter)	If Real Estate, Location by City & County		If Per	sonal Property, Descr	ibe
					e councy			

2. At any time during $\underline{2016}$ or $\underline{2017}$, did yo	u, your spouse, or mem	bers of your immediate	family sell to or buy from the State of	
North Carolina personal property with a ma	rket value of \$10,000 c	or more?		
☐ Yes ☑ No				
Name of Purchaser	Name of Purchaser Name of		Type of Property	
FINANCIAL INTERESTS	I			
3. As of <u>December 31, 2017</u> , did you, your state valued at \$10,000 or more? <u>LIST EACH Control of the A. Stock</u> in a publicly owned company? ☐ Yes ☑ No	_		own any of the following financial interests	
or pension or deferred compensation	on plans) if: (i) the fund ly member are able to	l is publicly traded or it	al funds, regulated investment companies, s assets are widely diversified; and (ii) n the mutual fund, investment company, or	
Owner of Interest		Full Name of Company (Do not use a ticker symbol)		
B. Stock Options in a company or busine ☐ Yes ☑ No	ess?			
Owner of Stock Option	on	Full Name of Co	ompany (Do not use a ticker symbol)	
C. Interests in a non-publicly owned compartnerships, joint ventures, limited liability ✓ Yes ☐ No If "No", proceed to ques	companies, limited lia	_	sole proprietorships, partnerships, limited closely held corporations)?	
Owner of Interest		Name of	Company or Business Entity	
Brandon Lofton		Robinson Bradshaw &	Hinson P.A.	

please list the names of any other companies	or business entities is	n which the primary cor	npany owns securities or equity interests	
valued at over \$10,000, if known. Non-Publicly Owned Company or Busi	iness Entity (the	Other Companies	in which the Primary Company Owns	
Primary Company)		Sec	urity or Equity Interests	
None or Not Known		Ī		
C (2). If you know that any company or b	ousiness entity listed	in 3.C or 3.C(1) above l	nas any material business dealings or	
business contracts with the State of North Can	·	by the State, provide a	brief description of that business activity.	
Name of Company or Business	s Entity	Description of	of Business Activity with the State	
☐ None or Not Known				
		Robinson Bradshaw has provided legal representation to the State and its departments and branches.		
Robinson Bradshaw & Hinson P.A.		Robinson Bradshaw ha and its departments an	as provided legal representation to the State d branches.	
4. As of <u>December 31, 2017</u> , were you, your value of \$10,000 or more that was created, es Do not list assets held in blind trusts. <u>See 201</u>	tablished, or controlle	and its departments and of your immediate familed by you?	d branches. ly the beneficiaries of a vested trust with a	
A. As of December 31, 2017, were you, your value of \$10,000 or more that was created, es Do not list assets held in blind trusts. See 201 Yes No Name and Address of Trustee	tablished, or controlle 7 SEI Helpful Tips fo	and its departments and of your immediate familed by you?	d branches. ly the beneficiaries of a vested trust with a	
4. As of <u>December 31, 2017</u> , were you, your value of \$10,000 or more that was created, es Do not list assets held in blind trusts. <u>See 201</u> Yes No	tablished, or controlle 7 SEI Helpful Tips fo	and its departments and of your immediate familed by you? or the definition of "Vestion of the definition of the defini	d branches. ly the beneficiaries of a vested trust with a sted Trust" and "Blind Trust."	
4. As of <u>December 31, 2017</u> , were you, your value of \$10,000 or more that was created, es Do not list assets held in blind trusts. <u>See 201</u> Yes No	tablished, or controlle 7 SEI Helpful Tips fo	and its departments and of your immediate familed by you? or the definition of "Vestion of the definition of the defini	d branches. ly the beneficiaries of a vested trust with a sted Trust" and "Blind Trust."	
4. As of <u>December 31, 2017</u> , were you, your value of \$10,000 or more that was created, es Do not list assets held in blind trusts. <u>See 201</u> Yes No	tablished, or controlle 7 SEI Helpful Tips fo	and its departments and of your immediate familed by you? or the definition of "Vestion of the definition of the defini	d branches. ly the beneficiaries of a vested trust with a sted Trust" and "Blind Trust."	
4. As of December 31, 2017, were you, your value of \$10,000 or more that was created, es Do not list assets held in blind trusts. See 201 Yes No Name and Address of Trustee	tablished, or controlle 7 SEI Helpful Tips for Description	and its departments an of your immediate familed by you? or the definition of "Vestof the Trust	y the beneficiaries of a vested trust with a sted Trust" and "Blind Trust." Your Relationship to the Trust	
4. As of December 31, 2017, were you, your special value of \$10,000 or more that was created, es Do not list assets held in blind trusts. See 201 Yes No Name and Address of Trustee 5. As of December 31, 2017, did you, your special value of \$10,000 or more that was created, es Do not list assets held in blind trusts. See 201	tablished, or controlled 7 SEI Helpful Tips for Description Descri	and its departments an of your immediate familed by you? or the definition of "Vestof the Trust your immediate family	d branches. ly the beneficiaries of a vested trust with a sted Trust" and "Blind Trust." Your Relationship to the Trust have liabilities of \$10,000 or more,	
4. As of December 31, 2017, were you, your avalue of \$10,000 or more that was created, es Do not list assets held in blind trusts. See 201 Yes No Name and Address of Trustee 5. As of December 31, 2017, did you, your specific processes and the mortgage on your primary personal processes.	tablished, or controlled 7 SEI Helpful Tips for Description Descri	and its departments an of your immediate familed by you? or the definition of "Vestof the Trust your immediate family	d branches. ly the beneficiaries of a vested trust with a sted Trust" and "Blind Trust." Your Relationship to the Trust have liabilities of \$10,000 or more,	
4. As of <u>December 31, 2017</u> , were you, your value of \$10,000 or more that was created, es Do not list assets held in blind trusts. <u>See 201</u> Yes No	tablished, or controlled 7 SEI Helpful Tips for Description Descri	and its departments an of your immediate familed by you? or the definition of "Vestof the Trust your immediate family	d branches. ly the beneficiaries of a vested trust with a sted Trust" and "Blind Trust." Your Relationship to the Trust have liabilities of \$10,000 or more,	
4. As of December 31, 2017, were you, your avalue of \$10,000 or more that was created, es Do not list assets held in blind trusts. See 201 Yes No Name and Address of Trustee 5. As of December 31, 2017, did you, your speculating the mortgage on your primary personants and intra-family debt.	Description Description Description Douse, or members of onal residence? Exam	and its departments an of your immediate familed by you? or the definition of "Vestof the Trust your immediate family apples include credit card	d branches. ly the beneficiaries of a vested trust with a sted Trust" and "Blind Trust." Your Relationship to the Trust have liabilities of \$10,000 or more,	
4. As of December 31, 2017, were you, your avalue of \$10,000 or more that was created, es Do not list assets held in blind trusts. See 201 Yes No Name and Address of Trustee 5. As of December 31, 2017, did you, your speculating the mortgage on your primary persoans and intra-family debt. Yes No	Description Description Description Douse, or members of onal residence? Exam	and its departments an of your immediate familed by you? or the definition of "Vestor the Trust your immediate family apples include credit card	ty the beneficiaries of a vested trust with a sted Trust" and "Blind Trust." Your Relationship to the Trust have liabilities of \$10,000 or more, debts, auto loans, student loans, personal or (Commercial Bank, Credit Union,	

lividends, rental income, busin	ess meome, and other types of meo				
Oo <u>not</u> include income receive	ed from the following sources:				
Capital gains	Federal government ret	irement			
Military retirement	► Military retirement				
Recipient of Income	Name of Source	Type of Business/Industry	Type of Income		
☐ I had no reportable income o	ver \$5,000 in 2017.				
Brandon Lofton	Robinson Bradshaw & Hinson P.A.	law firm	salary and bonus		
Kellie Lofton	Wells Fargo	banking	salary and bonus		
Brandon & Kellie Lofton	tenants	rental income	rent on home		
PROFESSIONAL AND CIVI	C RELATIONSHIPS	L			
employee, independent contract Carolina primarily for religious	tor, or registered lobbyist of a nonp, charitable, scientific, literary, pub	mediate family a director, officer, a profit corporation or organization of the blic health and safety, or education	operating in the State of North		
employee, independent contract Carolina primarily for religious Yes No If "No", pro Do not list State board	tor, or registered lobbyist of a nonposition, charitable, scientific, literary, put ceed to question 8.	profit corporation or organization of the State	operating in the State of North al purposes?		
employee, independent contract Carolina primarily for religious Yes No If "No", pro Do not list State board	tor, or registered lobbyist of a nonp, charitable, scientific, literary, put ceed to question 8.	profit corporation or organization of the State	operating in the State of North al purposes?		
employee, independent contract Carolina primarily for religious ✓ Yes ☐ No If "No", pro ✓ Do not list State board ✓ Do not list organization Name of Person	tor, or registered lobbyist of a nonposition, charitable, scientific, literary, publiceed to question 8. Is or entities, or entities created by the soft which you are a mere members.	profit corporation or organization of olic health and safety, or education a political subdivision of the State er. Name of Nonprofit	operating in the State of North al purposes? Nature of Business or Purpose		
employee, independent contract Carolina primarily for religious ✓ Yes □ No If "No", pro ✓ Do not list State board ✓ Do not list organization Name of Person Brandon Lofton	tor, or registered lobbyist of a nonposition, charitable, scientific, literary, publiceed to question 8. Is or entities, or entities created by the soft which you are a mere member this/Her Position	profit corporation or organization of olic health and safety, or education a political subdivision of the State er. Name of Nonprofit Corporation or Organization	Poperating in the State of North al purposes? Nature of Business or Purpose of Organization charitable-Legal Advocacy on		
employee, independent contract Carolina primarily for religious ✓ Yes □ No If "No", pro ✓ Do not list State board ✓ Do not list organization	tor, or registered lobbyist of a nonposition, charitable, scientific, literary, publiceed to question 8. Is or entities, or entities created by the sof which you are a mere member this/Her Position Director-President of Board	profit corporation or organization of olic health and safety, or education a political subdivision of the State er. Name of Nonprofit Corporation or Organization Council for Children's Rights	Poperating in the State of North al purposes? Nature of Business or Purpose of Organization charitable-Legal Advocacy on behalf of children		
mployee, independent contract Carolina primarily for religious Yes No If "No", pro Do not list State board Do not list organization Name of Person Seallie Lofton Cellie Lofton Compared to the composition of the compos	tor, or registered lobbyist of a nong, charitable, scientific, literary, publiceed to question 8. Is or entities, or entities created by one of which you are a mere member His/Her Position Director-President of Board Director Director Director	profit corporation or organization of olic health and safety, or education a political subdivision of the State er. Name of Nonprofit Corporation or Organization Council for Children's Rights Arts Empowerment Project Junior League of Charlotte b business with the State of North Organization or Organization	Nature of Business or Purpose of Organization charitable-Legal Advocacy on behalf of children charitable-promoting arts charitable-volunteer organization Carolina or receive State funds,		
Pemployee, independent contract Carolina primarily for religious Yes No If "No", proceed to Do not list State board Do not list organization Name of Person Standon Lofton Kellie Lofton (b). If the nonprofit corporation blease provide a brief description	tor, or registered lobbyist of a nong, charitable, scientific, literary, publiceed to question 8. Is or entities, or entities created by one of which you are a mere member His/Her Position Director-President of Board Director Director ns or organizations listed above do no of the nature of that business, if	orofit corporation or organization of the alth and safety, or education a political subdivision of the State er. Name of Nonprofit Corporation or Organization Council for Children's Rights Arts Empowerment Project Junior League of Charlotte b business with the State of North Oknown or with which due diligence	Nature of Business or Purpose of Organization charitable-Legal Advocacy on behalf of children charitable-promoting arts charitable-volunteer organization Carolina or receive State funds, ee could reasonably be known.		
Pemployee, independent contract Carolina primarily for religious Yes No If "No", proceed to Do not list State board Do not list organization Name of Person Standon Lofton Kellie Lofton (b). If the nonprofit corporation blease provide a brief description	tor, or registered lobbyist of a nong, charitable, scientific, literary, publiceed to question 8. Is or entities, or entities created by one of which you are a mere member His/Her Position Director-President of Board Director Director Director	orofit corporation or organization of the alth and safety, or education a political subdivision of the State er. Name of Nonprofit Corporation or Organization Council for Children's Rights Arts Empowerment Project Junior League of Charlotte b business with the State of North Oknown or with which due diligence	Nature of Business or Purpose of Organization charitable-Legal Advocacy on behalf of children charitable-promoting arts charitable-volunteer organization Carolina or receive State funds,		
mployee, independent contract Carolina primarily for religious Yes No If "No", pro Do not list State board Do not list organization Name of Person Standon Lofton Kellie Lofton (b). If the nonprofit corporation clease provide a brief description	tor, or registered lobbyist of a nong, charitable, scientific, literary, publiceed to question 8. Is or entities, or entities created by one of which you are a mere member His/Her Position Director-President of Board Director Director ns or organizations listed above do no of the nature of that business, if	orofit corporation or organization of the alth and safety, or education a political subdivision of the State er. Name of Nonprofit Corporation or Organization Council for Children's Rights Arts Empowerment Project Junior League of Charlotte b business with the State of North Oknown or with which due diligence	Nature of Business or Purpose of Organization charitable-Legal Advocacy on behalf of children charitable-promoting arts charitable-volunteer organization Carolina or receive State funds, ee could reasonably be known.		

Please answer the following que	estion as it p	_	g board/agency: presentatives				
society, organization, or advoca	cy group wi	nembers of your <u>imme</u> th an interest in matter	diate family a director, or sover which your agen	ey or board	governing board member of any may have jurisdiction? ou are filing because you are a		
legislator or a judicial officer or you are filing as an appointee to those offices.							
Do not list organizations of which you are only a member (not serving in a leadership role).							
Name of Person		Name of Society, Organization or Advocacy Group		Leadership Position (Director, Officer, Board Member)			
Brandon Lofton Council for Children's			s Rights	Director-F	resident of Boad		
Kellie Lofton		Junior League of Char	rlotte	Director			
Kellie Lofton		Arts Empowerment Pr	roject	Director			
9(a). List the name of each com was an employee, director, office	• •	•	· ·		· ·		
Name of Person		tionship to Filer	Name of Comp		Role of Person		
☐ No Business Associations	1		·				
Brandon Lofton	Filer		Robinson Bradshaw & P.A.	Hinson,	Employee/Shareholder		
Kellie Lofton	Spouse		Wells Fargo		Employee		
9(b). If you know that any comp with the State of North Carolina activity.	·	•	•				
Name of Compan	y or Busine	ess Entity	Description of	f Business	Activity with the State		
☐ Not applicable (No entities li	sted on #9a)	☐ No relationship /]	Not known				
Robinson Bradshaw & Hinson,	P.A.		Robinson Bradshaw hadepartments and branc		representation to the State, its		
Wells Fargo			Wells Fargo is a banki dealings/regulation in	ng instituti the State.	on with significant		
10. Are you a practicing attorney? ✓ Yes □ No □ Judicial Officer/State Attorney							
If "Yes", check each category of more than \$10,000 during 20	•	sentation in which you	or the law firm with w	nich you ar	e affiliated has earned legal fees		
✓ Administrative	☐ Admira	ltv			✓ Criminal		
✓ Decedent's Estates	☑ Admira ☑ Enviror	•	✓ Corporate ✓ Insurance		✓ Labor		
✓ Local Government	☑ Real Pr		✓ Securities		☑ Tax		
		-			— Ian		
Tort litigation (including							

11. <u>During 2017</u> , were you a licensed professional (other than an attorney) or did you provide consulting services individually or as a member of a professional association for which you charged or were paid over \$10,000? ☐ Yes ☑ No						
Type of	Business	Natı	ire of Serv	vices Rendered		
Please answer the following ques	stion as it pertains to the following House of Rep	•				
12. Are you or your employer, yo	our spouse or members of your im	mediate family, or their	r employer	currently:		
• <u>Licensed by</u> the State board or	employing entity with which you	are or will be associated	ed or			
• Regulated by the State board of	or employing entity with which you	u are or will be associa	ted or			
• Have a business relationship w	vith the State board or employing 6	entity with which you a	re or will b	e associated?		
✓ Yes ☐ No ☐ Legislator/Ju	dicial Officer - You are not requ	ired to complete this qu	estion if y	ou are filing because you are a		
<u> </u>	a judicial officer ("judicial officer"	" is defined in the SEI l	Helpful Tip	os) or you are filing as an		
**	those offices.					
Name of Person	Name of Employ	ver (if applicable)		of Relationship (Licensing, Regulatory, Business)		
Brandon Lofton	Robinson Bradshaw &	z Hinson, P.A.		cticing attorney, licensed by the Bar. My firm may be regulated te.		
Kellie Lofton	Wells Fargo		Wells Farg	go may conduct business with/be by the State.		
	ember of your <u>immediate</u> family c nonths preceding your filing of thi		lobbyist or	r lobbyist principal or were you		
Name of Lobbyist	Lobbyist's Principal	Date of Registra	tion	Registration Expiration		
OTHER DISCLOSURES						

14. During any calendar quarter i candidate), did you	in 2017 (but only the time period	after you were appointed, employ	red or filed or were nominated as a
• receive any gift(s) exceeding \$	200 per quarter from a person or g	group of persons acting together,	and
• when both you and those perso	on(s) were outside North Carolina	at the time you accepted the gift(s), and
• the gift(s) were given under cir	cumstances that would lead a reas	sonable person to conclude that th	ney were given for lobbying?
☐ Yes ☑ No			
▶ Do not report gifts give	n by members of your extended fa	amily.	
► Do not report gifts that Report for Exempted Po	have previously been reported by ersons."	you to the Department of the Sec	retary of State on the "Expense
Date Item Received	Name and Address of Donor(s)	Describe Item Received	Estimated Market Value
Please answer the following ques	stion as it pertains to the following		
15 During 2017 (but only the tir	House of Re ne period after you were appointe	presentatives	oinetad es e candidata) did vou
	eding \$200 from a person or group		inflated as a candidate) did you
• those person(s) were outside N		y or persons acting together and	
•	your public position? A "scholar	shin'' is a grant-in-aid either di	rect or indirect to attend a
	r event, including tuition, travel		
	cer - You are not required to com		-
	eer appointee.		, c
 Do not report gifts that Report for Exempted Per 	have previously been reported by ersons."	you to the Department of the Sec	retary of State on the "Expense
Legislators are not requ	ired to report scholarships paid by	a nonpartisan legislative organiz	zation of which the legislator or
•	s a member or participant or an af		
Date of Scholarship	Name and Address of Donor(s)	Describe Event	Estimated Market Value

Please answer the following question as it p	ertains to the following board/age	ncy:	
	House of Representativ	ves	
16. Were you appointed or are you being co	onsidered for an appointment to a c	covered boar	rd by the Governor or another Council of
State member?			
Council of State members are:			
• Governor	• Lt. Governor	Secretary	of State
State Auditor	• State Treasurer	• Superinte	endent of Public Instruction
Attorney General	• Commissioner of Agriculture	• Commiss	sioner of Labor
• Commissioner of Insurance			
☐ Yes ☑ No			
If "Yes", list all contributions you (NOT	immediate family members) ma	de during 2	017 with a cumulative total of more than
\$1,000 to the Governor or other Council of	of State member who appointed	you.	
Contributions are defined in N C (S.S. 163, 278, 6(6) and include, but	are not limi	ted to, "any advance, conveyance, deposit,
			ey or anything of value whatsoever."
distribution, transfer of funds, foar	i, payment, girt, pieage of subscrip	tion of mon	ey or anything or value whatsoever.
Date	Amount		Contributed to
☐ No contribution(s) with a cumulative tota	al of more than \$1,000		

Please answer the following question as it pertains to	the following board/agency House of Representatives	<i>7</i> :		
17. Are you an appointee or prospective appointee to:				
a. the head of a principal state department (e.g. cab. a North Carolina Supreme Court Justice, Courorc. a member of any of the following boards:	V: 11			✓ No o'', proceed to question
 ABC Commission Coastal Resources Commission State Board of Education State Board of Elections Division of Employment Security Environmental Management Commission Industrial Commission Human Resources Commission Rules Review Commission Board of Transportation UNC Board of Governors Utilities Commission Wildlife Resources Commission 				
d. If so, were you appointed or are you being con position by a Council of State member? Council	= =	=		□ No
e. If so, you must indicate whether during 2017 y in any of the following activities with respect to a committee of the Council of State member who a i. Collected contributions from multiple concontributions, and transferred or delivered the or committee? Contributions are defined in a	or on behalf of the candidat appointed you to your publi tributors, took possession on asse collected contributions	e or campaign c position: f such multiple	□Yes	□No
ii. Hosted a fundraiser at your residence or p iii. Volunteered for campaign-related activit phone banks, event assistance, mailings, can			□ No	
advances the campaign of a candidate? 18. Have you ever been convicted of a felony for whi expungement regarding that conviction? Yes No	ch you have not received ei	ther: (i) a pardon of	innoce	nce; or (ii) an order of
Offense	Date of Conviction	County of Convid	ction	State of Conviction

19. Are you aware of any other information that <i>you believe</i> may as compliance with the State Government Ethics Act?	sist the State Ethics Commission in advising you concerning your
☐ Yes ☑ No If yes, please provide such information below.	
AFFIRMATION	
I affirm that the information provided in this Statement of Economiaccurate to the best of my knowledge and belief.	c Interest and any attachments hereto are true, complete, and
I also certify that I have not transferred, and will not transfer, any as disclosure while retaining an equitable interest.	sset, interest, or property for the purpose of concealing it from
I understand that my Statement of Economic Interest and any attach	ments or supplements thereto (with the exception of the
Confidential Form regarding Unemancipated Children) are public re	ecord.
I acknowledge that I have read and understand N.C.G.S. 138A-26 read N.C.G.S. 138A-27 regarding providing false information:	egarding concealing or failing to disclose material information
§ 138A-26. Concealing or failing to disclose material informat	ion.
A filing person who knowingly conceals or knowingly fails to statement of economic interest under this Article shall be guilty action under G.S. 138A-45.	disclose information that is required to be disclosed on a y of a Class 1 misdemeanor and shall be subject to disciplinary
§ 138A-27. Penalty for false information. A filing person who provides false information on a statement the information is false is guilty of a Class H felony and shall be	of economic interest as required under this Article knowing that be subject to disciplinary action under G.S. 138A-45.
☑ I Agree. It is my intention that this check box constitutes my ele- information provided in this Statement of Economic Interest and best of my knowledge and belief.	
Filed Electronically	3/12/2018
Signature	Date
Brandon Marcus Lofton	
Printed Name	